Application or Docket Number

			AS FILED		2004 081			<u></u>	J/	7478	
			•	umn 1)	(Column 2)		SMALL EI	YTITY] OF	OTHE	
U.S. NATIONAL STAGE FEES						7 [RATE	FEE	7	RATE	FE
BASIC FEE						7	BASIC FEE	+		BASIC FEE	
EXAMINATION FEE							EXAM. FEE	 	-{ ```	EXAM. FEE	30
SEARCH FEE						- -	SEARCH FEE		-	<u></u>	20
FEE FOR EXTRA SPEC. PGS.			m	minus 100 =		1	X \$ 125 =		-	SEARCH FEE	1/0
TOTAL CHARGEABLE CLAIMS			2/r	ninus 20 = *	/ 50 =	- -	X \$ 25 =	 	-	X \$ 250 =	-
NDEPENDENT CLAIMS			α	minus 3 = *	<u>-/</u>	┨┠		 	OR		5
MULTIPLE DEPENDENT CLAIM PRE				***		┨┠	X \$ 100 =	ļ	OR	X \$ 200 =	100
* If the difference in column 1 is less than zero, enter "0" in column 2							+ \$ 180 =		OR	+ \$ 360 =	
	Total Independent FIRST PRES	(Column 1) CLAIMS REMAINING AFTER AMENDMENT * ENTATION OF	Minus Minus MULTIPLE DEF	(Column HIGHES' NUMBEF PREVIOUS PAID FOR **	PRESENT LY EXTRA		RATE X \$ 25 = X \$ 100 =	ADDI- TIONAL FEE	OR OR OR	RATE X \$ 50 = X \$ 200 =	ADD TION FEE
		(Column 1)		(Column 2		} <u></u>	+ \$ 180 = DTAL ADDIT. FFF		OR OR	+ \$ 360 = TOTAL ADDIT. FFF	
AMENDINEN B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONA FEE
	Total	*	Minus	**	=	>	< \$ 25 =		OR	X \$ 50 =	
		*	Minus	***	2 ·	X	\$ 100 =		OR	X \$ 200 =	
	Independent		<u> </u>								
		ENTATION OF M	1ULTIPLE DEP	ENDENT CLAI	м	. +	\$ 180 =		OR	+ \$ 360 =	

if the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.